

**INSTRUCTIONS FOR COMPLETING THE
FRESH FRUIT AND VEGETABLE PROGRAM
GRANT APPLICATION
2010-2011**

I. GENERAL INFORMATION		
BOX	DIRECTIVE	INSTRUCTIONS
1	School Food Authority (SFA) / Agency Name	Name of the district or school
	Mailing Address <i>Street, City, State, Zip</i>	Mailing address of school food authority
	Agency Code	School's or district's agency code
2	Food Service Director or equivalent	List the first and last name of the SFA food service director. If there is not a food service director, please list the first and last name of the person who is equivalent to a food service director (head cook, dining services director, etc.)
	Title	Name the appropriate title: food service director, head cook, dining services director, etc.
	CESA No.	CESA that district is located
	E-Mail Address	E-mail address of food service director or equivalent
	Fax Area/No.	Fax area code and number of food service director or equivalent
	Telephone Area/No.	Telephone area code and number of food service director or equivalent
3	Program Coordinator/Main Contact <i>If other than Food Service Director</i>	If an individual, other than the food service director or equivalent, will be the program coordinator/main contact for the FFVP, please list their first and last name (ex. teacher, nurse, principal, assistant cook, etc.)
	Title	Name the appropriate title: teacher, nurse, principal
	E-Mail Address	E-mail address of program coordinator/main contact
	Fax Area/No.	Fax area code and number of program coordinator/main contact
	Telephone Area/No.	Telephone area code and number of program coordinator/main contact
	Program Coordinator's Mailing Address	Mailing address of program coordinator (may be different than mailing address of School Food Authority)
4	Other Personnel Involved with FFVP <i>Name, Title, E-Mail Address, Fax No. & Telephone No.</i>	Often, additional school staff including teachers, bookkeeper/accountants, principals, nurses, assistant kitchen staff, etc. are involved in operating and administering the FFVP. Please list all individuals who will be involved with your school's FFVP along with their title, e-mail address, fax and telephone area code and phone number
5	School Building Name	Name the actual school applying for the grant.

		Please remember that each school applying for the FFVP must submit its own application.
	Team Nutrition School	Participating schools are required to be a Team Nutrition School this year. If your school is not a Team Nutrition School you can apply for participation: http://dpi.wi.gov/ne/index.html
	Building Enrollment	Student enrollment
	Building Grade Levels Served	List the range of grades in this school building (ex. K-5, K-3, K-12). For the FFVP, schools must be able to separate out elementary students in a K-12 school.
	No. of Children Approved for Free Meals	Report number approved as of October 1, 2009
	No. of Children Approved for Reduced Price Meals	Report number approved as of October 1, 2009
6	Free/Reduced Price Meal Data	Use 10/09 claim data for free/reduce reimbursement
	No. of Free Lunches Claimed	Use 10/09 claim data for free/reduce reimbursement
	No. of Reduced Price Lunches Claimed	Use 10/09 claim data for free/reduce reimbursement
	No. of Paid Lunches Claimed	Use 10/09 claim data for free/reduce reimbursement
	Total Lunches Claimed	Use 10/09 claim data for free/reduce reimbursement
	Average Daily Participation At Lunch	Use 10/09 claim data for free/reduce reimbursement
7	Meals Offered in the School <i>Check all that Apply</i>	Check which child nutrition programs your school offers (NSLP = National School Lunch Program, SBP = School Breakfast Program). Schools MUST participate in the NSLP to be eligible for the FFVP
8	Food Preparation Method	Check the method the school utilizes for preparation of school meals. (FSMC = Food Service Management Company)
9	Describe School Location	Check the box which best describes the community in which the school is located

II. ASSURANCES

Please read this entire section.

III. CERTIFICATION/SIGNATURES

This section **must be** signed and dated by the District of School Administrator, School Principal, and Food Service Director or equivalent.

IV. CERTIFICATION COVERING DEBARMENT

Please read this entire section.

LEA/Agency/Company Name	Generally, name of school district (public) or entity of education agency (private)
Name and Title of Authorized Representative	First and last name and title of person listed on the online contract. May be district administrator, food service director, business director, etc.
Signature and Date Signed	Signature of Authorized Representative and date signed.

V. PARTICIPATION AGREEMENT

There are parts of this section that will need to be filled in:

This agreement is between the Wisconsin Department of Public Instruction and (name of SFA) and covers the period from 7/01/2010 to 6/30/2011.

A. 3. The SFA agrees to provide funds to the approved school, namely (list name of school applying)

VI. SIGNATURES

State Agency	To be signed by DPI Representative
School Food Authority	Signature of Authorized Representative
Title	Title of person signing as Authorized Representative
Date Signed	Date Signed

VII. FFVP APPLICATION/NARRATIVE

Provide background data and related information to justify the selection of this project. The narrative will provide sufficient evidence that this project is of such scope and quality as to be effective. Provide specific answers along with examples to the following questions.
(Recommended Reference: USDA FFVP Handbook, <http://dpi.wi.gov/fns/ffvp.html>.)

Below are detailed instructions for each portion of this section:

A. Describe your plan in regards to time of day and days of week for distribution of fresh fruits and vegetables. Please include your planned method for distribution (examples: classroom, kiosks in the hallways, cafeteria).

How and when will the school distribute fruits and vegetables to students? For the FFVP to be successful, students must receive the snack regularly a minimum of 3 days/week but ideally 5 days/week. The most successful distribution areas will be places where children can easily reach the fruits and vegetables. Distribution to all students may occur at the same time or at multiple times during the day (ex. trays of fruit/vegetables delivered to each classroom or baskets of fruit/vegetables made available for pick up at a specific time). The fruit and vegetable snack may also be placed in public places throughout the school (ex. hallway kiosk, library, vending machines, and nurse's office) to maximize participation. In this section, please detail your school's plans for distribution.

Also describe your planned method of obtaining/preparing the fresh produce and any need to purchase major equipment to operate the program.

For a successful program, coordination between administration/staff and the food service department is necessary. Please detail how your school will properly procure and safely prepare the fresh fruit/vegetable snack. Who will be responsible for ordering a variety of fruit/vegetables while ensuring quality produce is delivered? How will the food service department, contracted vendor or other designated staff prepare/service the snack? What is your plan for purchasing major equipment, if any?

B. Describe the responsibilities of each person that will be involved in the FFVP, including, but not limited to school food service, school administration, school finance, teachers, parents, and volunteers.

Please define the roles of all individuals who will be involved with the implementation and operation of the FFVP at your school. Think about the various steps and aspects of the program: procurement, preparation, distribution, clean-up, nutrition education, advertisement and promotion, parent-outreach, community-outreach, evaluation, program administration, etc.

C. Describe your plans to partner with one or more entities that provide nonfederal resources for acquiring, handling, promotion, distributing or teaching about fresh fruits and vegetables that contribute to the purpose of the program. Please include any plans for purchasing fresh fruits and vegetables from local growers and farmers.

Describe nonfederal entities that your school will work with to implement and operate the FFVP. Nonfederal resources include, but are not limited to, PTA/PTO, local produce companies or grocery stores, culinary and/or life skills students, local dietitians, fruit or vegetable bureaus, and Cooperative Extension Agents, etc. Local farmers and growers are also a nonfederal resource and USDA highly encourages schools to work with local growers to procure fruits and vegetables.

D. USDA requires participating schools to widely advertise the FFVP to students, staff, parents, and the community. How will your school accomplish this?

How will you communicate with students, parents, teachers, and the community about the fresh fruit and vegetable program? What methods, media, and resources will you use? What type of information will be communicated?

E. Describe how your school is fostering a healthy school environment. How will there be a continuing emphasis on student health and wellness with FFVP funding? How does this program support your school's Wellness Policy?

For the FFVP to be successful it needs to be fully supported by school officials and staff who believe in working towards a healthy school environment. Describe how your school is nurturing a healthy school environment and how it evaluates its progress so that improvements are occurring. In addition, describe how the FFVP will support health initiatives already in place at your school and explain how the FFVP will take your healthy school environment to the next level?

F. Tell us briefly why your school should be chosen. What does your school want to accomplish through this program and how will it be accomplished? Also, what barriers do you foresee with implementing the FFVP in your school and how will you overcome them?

This is the time to tell DPI anything else about your school and why it should be considered for the FFVP grant. State what you hope to accomplish and also include anything you foresee as a barrier to the implementation or operation of the program and how you plan to overcome them. Anticipating any issues or problems ahead of time will help make your implementation plan run more smoothly.

OPTIONAL EVALUATION:

There is no student or teacher evaluations required by USDA-FFVP, however, schools will have the opportunity to participate in optional evaluations developed by DPI and the Department of Human Services (DHS) and Wisconsin Partnership for Activity and Nutrition (WI PAN). These evaluations may be useful for determining the effectiveness of your FFVP and how well the FFVP is supporting your school's Wellness Policy. More information will be made available to schools chosen to participate in the 2010-2011 FFVP.